Attorney Docket No. UMC-96-279 CON Client Matter No. 81848.0016.001



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial No. 09/546,174

Application of: LIU, Chih-Chien et al

Filed: April 11, 2000

Art Unit: 1711

Examiner: SERGENT, R.A.

Attorney Docket No. UMC-96-279 CON

For:

HIGH DENSITY PLASMA CHEMICAL

VAPOR DEPOSITION PROCESS

Confirmation No.: 4793

Customer No.: 25235

CERTIFICATE OF MAILING BY EXPRESS MAIL

MAIL STOP RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

The undersigned hereby certifies that the attached

1. RCE Transmittal:

2. Petition for 1-Month Extension;

3. Copy of Amendment and Response Under 37 C.F.R. § 1.113, submitted August 4, 2003;

4. Fee Transmittal:

5. Check for \$880.00 (\$770 for RCE; \$110 for 1-Month Extension);

6. Return Card, and

this Certificate of Mailing by Express Mail relating to the above application, were deposited as "Express Mail", Mailing Label No. EL533428997US with the United States Postal Service, addressed to Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1/450, on November 19, 2003.

November 19, 2003

November 19, 2003

Eugene J. Bernard, Reg. No. 42,320

Hogan & Hartson L.L.P. 1200 17th Street, Suite 1500 Denver, Colorado 80202 (303) 454-2457 (telephone) (303) 899-7333 (facsimile)

FEB TRANSMITTAL for FY 2004					C mplete if Known						
					Application Number 09/546,174						
					Filing Date			11, 2000)		
Ma 1 To a State of the state of					First Named Inventor			Chien L	.IU		
					Examiner Name R			ERGEN	1T		
Applicant claims small entity status. See 37 CFR 1.27				Group	Group / Art Unit 1711						
TOTAL AMOUNT OF PAYMENT (\$)880.00					Attorney Docket No. UMC-96-279 CON						
METHOD OF PAYMENT (check all that apply)					FEE CALCULATION (continued)						
□ Check □ credit card □ money order □ other □ none □ Deposit Account					3. ADDITIONAL FEES						
Deposit Account Number	50-1123			Large Entity Fee (\$)	Small Entity Fee (\$)		Fee Descri	•	Fee Paid		
Deposit	Hogan	9 Hartes	n I I B	130 50	65 25	Surcharge – Surcharge –	-		ee or		
Deposit Account Name Hogan & Hartson L.L.P.				130	130	cover sheet					
The Commissioner is hereby authorized to: (check all that apply)				2,520	2,520	-	For filing a request for ex parte				
☐ Charge fee(s) indicated below ☑ Credit any overpayments ☑ Charge any additional fee(s) for this filing					920*	reexamination					
☐ Charge fee(s) indicated below, except for the filing fee to the above-				920* 1,840*		Examiner action					
identified deposit account					1,840*	Requesting publication of SRI after Examiner action					
					55 205		on for reply within first month			\$110.00	
FEE CALCULATION 1. BASIC FILING FEE				950	205 465		ension for reply within second month				
Large		Description		330	400	Extension for	. ,				
Entity Fee (\$)	Entity Fee (\$)	·	Fee Paid	1,480	725						
750	375 Utility Filin	_	\$	2,010	985	Extension for	reply within	n fifth montl	h		
330	165 Design filir	ng fee		320	160	Notice of App	eal				
520	260 Plant filing	fee		320	160	Filing a brief i	n support o	of an appea	ıl		
750	375 Reissue fil	ing fee		280	140	Request for o	ral hearing				
160	80 Provisiona	l filing fee		1,510	1,510	Petition to ins proceeding	titute a put	olic use			
SUBTOTAL (1) (\$)				110 1,300	55 650	Petition to rev					
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE				1,330	650		evive – unintentional fee (or reissue)				
Z. EXTIO		Fee fro		480	235	Design issue	•	•			
Total Claims	Extra Claims -20**=	X 18	= \$	640	315	Plant issue fe	е				
Independent Claims	-3**=	× 84	= \$	130	130	Petitions to th	e Commis	sioner			
Multiple Deper	ndent		= \$	50	50	Processing fe		•	,		
**or number pre- Large Entity	viously paid, if greater; For Rei		ow Description	180 40	180 40	Submission o Recording ear					
Fee (\$) 18	Fee (\$) 9 Claim	ns in excess o	of 20	750	375	property (times	number of p	operties)	.		
84	42 Indep	endent claim	s in excess of 3	750	375	CFR § 1.129(a		ntion to be	Ì		
280	140 Multig	ole dependen	t claim, if not paid	770	375	examined (37 Request for C			,	\$770.00	
84	42 **Rei	ssue indepen	dent claims over	900	900	Request for e	xpedited ex			\$770.00	
18	9 **Rei	ial patent ssue claims i ial patent	n excess of 20 and over	Other fee	(specify)	design applica	anou	•••			
	SUBTOTAL (2)	(\$)		*Reduced	by Basic Flir	ng Fee Paid	SUBT	OTAL (3)	ſ	(\$)880.00	
SUBMITTED BY Complete (if applicable) Name (Print/Type) Eugene J. Bernard Registration No. (Accordance) 42.320 Telephone (303) 454-2457											
Signature	C 1	A)		(Attor	ney/Agent)	42,320				mber 19. 2003	